

Application for Building Permit ACCESSORY STRUCTURES

Call Miss Utility before you dig: 1.800.282.8555

		Permu #
JOB SITE:		
No	Street	Suite
Lot No	Subdivision	Phase
IDENTIFICATI	ION:	
Applicant _		Phone No
(Address) _		
Owner -		
Contractor		Phone No
		License No
	igned, own or act as agent for the owner of the a	
Signature _		
DESCRIPTION Shed	I OF PROPOSED CONSTRUCTION:	Total Cost of Improvement \$
	Stick Built square feet	ZONE
	Pre-fabricatedsquare feet	PROPOSED USE
	be the type of materials to be used:	
	Anchors	
	Hurricane Straps	
	Wood	
	Siding	
	Doors	
	Concrete	
	ksquare feet Wood Composite Other	
	ce linear feet	
0	Wood Vinyl Chain link	Other

Culimming Real causes feet			
□ Swimming Pool square feet □ Above-ground □ In-ground □ Temporary Seasonal			
Please describe the type of materials to be used:			
□ Liner			
☐ Filtration System			
□ Electrical System			
NOTE: Electrical Application / Inspections are required through First State Inspections 1-800-468-7338 (in Delaware) or 302-856-33517 (outside Delaware)			
TOWN OF CAMDEN REQUIREMENTS			
CONTRACTORS: The contractor of record as well as all sub-contractors shall acquire a Town of Camden Business License from the Finance Administrator. A current State of Delaware Business License and current Certificate of Liability shall also be required in addition the license fee, payable via check, Visa, Master Card, Discover, Card or Cash. (Applications may be found on the website, www.townofcamden.com or by visiting Town Hall.)			
NOTE: To avoid a cease and desist order, please ensure all contractors on site are licensed.			
INSPECTIONS: 48 hour notification is required for all inspections, NO EXCEPTIONS.			
The following inspections are required:			
□ Footing □ Electrical			
☐ Frame ☐ Other			
□ Final			
All other inspections as required by the Inspector And the time Demoise IV.			
☐ (Fee & Application Required)			
NOTE: All inspections are scheduled by the <u>Land Use Administrator</u> by calling 302-697-2299.			
SCHEDULING REQUIREMENTS:			
 A request made for a.m./p.m. inspection will be scheduled for the a.m./p.m. 48 hours after the request is made Cut off for calling in inspections requests is 3:30 p.m. 			
Cancellation of Inspections A contraction of Inspection A contraction of Inspection A contraction of Inspection of Inspe			
 A canceled inspection request shall be received 24 hours prior to the scheduled inspection Rescheduling a canceled inspection without 24 hour notice shall be re-scheduled following the above inspection process. A \$75 cancellation/re-inspection fee is required. 			
• Re-inspections			
 Failed inspections shall be res-scheduled following the above inspection process. A \$75 re-inspection fee prior is required to being placed on the schedule. 			
FOR OFFICE USE ONLY:			
DATE RECEIVED: PERMIT NO			
DATE ISSUED:			
DENIED REASON FOR DENIAL			